



## Ohio Administrative Code

### Rule 5160:1-5-02.2 Medicaid: breast and cervical cancer project (BCCP): eligibility requirements.

Effective: December 14, 2020

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- (A) This rule describes the eligibility criteria for BCCP medicaid.
- (B) An individual shall meet all of the following criteria to be eligible for BCCP medicaid:
- (1) Be screened for breast or cervical cancer under the national breast and cervical cancer early detection program (NBCCEDP).
    - (a) An individual is not required to obtain screening for both breast and cervical cancer as a condition of eligibility for participation in the NBCCEDCP.
    - (b) Individuals screened for breast or cervical cancer under the NBCCEDP in a state other than Ohio must be determined eligible for the Ohio department of health (ODH) BCCP and must utilize the ODH BCCP case management services and Ohio's BCCP medicaid application process as outlined in rule 5160:1-5-02.4 of the Administrative Code.
  - (2) Be in need of treatment for breast or cervical cancer, precancerous conditions, or early stage cancer, as indicated by a treating health professional, based on the centers for disease control and prevention (CDC) NBCCEDP funded screening.
  - (3) Be uninsured as defined in rule 5160:1-5-02.1 of the Administrative Code.
  - (4) Must not meet the eligibility criteria of any other medicaid program described in Chapters 5160:1-3, 5160:1-4, 5160:1-5, and 5160:1-6 of the Administrative Code.
  - (5) Be under sixty-five years of age.
  - (6) Meet all other nonfinancial eligibility requirements applicable to medicaid applicants described in Chapters 5160:1-1 and 5160:1-2 of the Administrative Code.



(C) Effective date of BCCP medicaid. As defined in rule 5160:1-2-01 of the Administrative Code, the effective date is the first day of the month that the Ohio department of medicaid (ODM) receives an application for BCCP medicaid and the individual meets all eligibility requirements described in this rule.

(1) Retroactive eligibilty shall be explored as described in rule 5160:1-2-01 of the Administrative Code.

(2) The first month of BCCP medicaid coverage may be a partial month of coverage based on the date of diagnosis of breast or cervical cancer, pre-cancerous conditions, or early stage cancer. "Date of diagnosis" is defined in rule 5160:1-5-02.1 of the Administrative Code.

(D) BCCP medicaid shall be discontinued when the individual meets the eligibility criteria of any other category of medicaid. If the individual is determined eligible for any other category of medicaid, the last day of BCCP medicaid coverage will be the last day of the month prior to the month the new category of medicaid begins.

(E) The Ohio department of health (ODH) or its designated local agencies or subgrantees shall:

(1) Determine the individual eligible for the ODH BCCP.

(2) Screen for all other medicaid programs before determining the individual eligible for ODH BCCP.

(F) The Ohio department of medicaid (ODM) shall:

(1) Screen all BCCP medicaid applicants for potential eligibility in other medicaid programs as described in rule 5160:1-5-02.4 of the Administrative Code.

(2) Require BCCP medicaid applicants to provide information regarding income and/or resources to screen the applicant for potential eligibility for other medicaid programs.



(3) Not provide BCCP medicaid coverage, including retroactive coverage, for any period of time preceding the date of diagnosis of breast or cervical cancer, pre-cancerous conditions, or early stage cancer.

(G) Individuals not meeting citizenship or immigration status eligibility requirements may be eligible for coverage for an emergency medical condition as described in rule 5160:1-5-06 of the Administrative Code.